



MAY 2005 MONTHLY REPORT
(Updated February 2006)

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.
May 2005 Monthly Report - Updated February 2006

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
MONTHLY STATISTICS FOR MAY 2005 MONTH END
EXECUTIVE SUMMARY**

	May 2005*	November 2004
Bank Summary		
Checkwrite	\$7,964,585.70	\$6,647,013.87
Book Balance(US Bank & State General Account)	\$48,034,750.00	\$45,505,246.00
Enrollment		
Plan 1A	7,906	8,078
Plan 1B	9,544	8,445
Plan 2	1,709	1,746
Total	19,159	18,269
New Applications Received		
Claims		
Claims Processed	114,180	99,175
Average Processing Days	16.00	16.00
Claim Inventory - Over 30 Days Old	4,336	1,897
Claim Inventory - Total	17,272	10,544
Claims Denied(NonPBM)	10,058	9,230
Claims Denied(PBM)	21,252	8,873
Claim Accuracy Performance	99.60%	99.97%
Customer Service/Policyholder Services		
Number of Calls Received	17638	8,708
Percentage of Calls Answered	98.10%	82.10%
Written Correspondence - Received	671	462
Written Correspondence - Completed	521	452
Written Correspondence - Inventory	652	26
Average Hold Time for Telephone Calls	0.39	3.63

***Please note: Due to the transition of HIRSP plan administration services to a new contractor effective April 1, 2005 claims volumes, payments and other operational statistics may be accounted for differently. Care should be used when trying to compare data from prior to April 1, 2005 to data from April 1, 2005 going forward.**

Also note that adjustments as reported by the previous administrator are no longer being counted in reports found on pages 26, 27 and 28 beginning with April 2005 data.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
MAY 2005 MONTHLY REPORT
TABLE OF CONTENTS**

FINANCIAL REPORTS

BREAKDOWN OF INCURRED CLAIMS AND EARNED PREMIUM	1
FINANCIAL REPORT NOTES	2-3
FISCAL YEAR UNAUDITED STATEMENT OF REVENUES, EXPENSES AND CHANGES IN RETAINED EARNINGS	4
FISCAL YEAR DETAIL OF MISCELLANEOUS REVENUE & ADMIN. EXPENSE	5
FISCAL YEAR INTERIM RECONCILIATION	6-7
FISCAL YEAR UNAUDITED BALANCE SHEETS	8
PROVIDER CONTRIBUTION REPORT	9
CALENDAR YEAR UNAUDITED STATEMENT OF REVENUES, EXPENSES & CHANGES IN RETAINED EARNINGS	10
CALENDAR YEAR DETAIL OF MISCELLANEOUS REVENUE & ADMIN. EXPENSES	11
CALENDAR YEAR INTERIM RECONCILIATION	12-13
CALENDAR YEAR UNAUDITED BALANCE SHEET	14
EARNED PREMIUM REPORT	15
ASSESSMENT REPORT	16

POLICYHOLDER ACTIVITY REPORTS

APPLICANT ACTIVITY	17
APPLICANT ELIGIBILITY DETERMINATION	18
TOTAL POLICIES & SUBSIDIZED POLICIES IN FORCE	19
TOTAL POLICIES IN FORCE BY PLAN, GENDER & AGE GROUP	20
TOTAL POLICIES IN FORCE BY PLAN, GENDER, ZONE & AGE GROUP	21-23
TOTAL SUBSIDY/NON-SUBSIDY	24
CUSTOMER SERVICE OPERATING REPORT	25
CLAIMS PROCESSED REPORT	26
AVERAGE CLAIM DAYS TO PROCESS REPORT	27
CLAIMS INVENTORY REPORT	28
CLAIMS DENIED REPORT	29
PBM CLAIMS DENIED REPORT	30
CLAIMS ACCURACY REPORT	31
APPEALS AND GRIEVANCE SUMMARY	32

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

May 2005 Monthly Report - Updated February 2006

Wisconsin Health Insurance Risk-Sharing Plan
Breakdown of Incurred Claims and Earned Premium
by Quarter and Plan

3Q03					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$20,375,143	\$10,846,522	187.8%	\$799.53	\$425.62
Plan 1B	7,436,020	7,649,161	97.2%	356.20	366.41
Plan 2	4,248,287	2,062,401	206.0%	816.66	396.46
Total	\$32,059,450	\$20,558,083	155.9%	\$621.77	\$398.71
4Q03					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$22,644,063	\$10,825,220	209.2%	\$889.96	\$425.45
Plan 1B	9,584,810	8,013,666	119.6%	436.21	364.71
Plan 2	4,489,406	2,062,818	217.6%	861.86	396.01
Total	\$36,718,279	\$20,901,704	175.7%	\$697.72	\$397.17
1Q04					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$19,671,524	\$10,273,986	191.5%	\$801.68	\$418.70
Plan 1B	9,750,553	8,769,984	111.2%	405.29	364.54
Plan 2	4,014,558	2,060,924	194.8%	768.04	394.28
Total	\$33,436,635	\$21,104,894	158.4%	\$621.23	\$392.12
2Q04					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$21,817,981	\$10,446,926	208.8%	\$871.60	\$417.34
Plan 1B	11,121,952	9,078,492	122.5%	446.38	364.36
Plan 2	4,879,335	2,092,994	233.1%	928.16	398.13
Total	\$37,819,268	\$21,618,413	174.9%	\$685.07	\$391.60
3Q04					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$21,311,378	\$11,627,516	183.3%	\$860.09	\$469.27
Plan 1B	11,393,181	10,348,024	110.1%	448.55	407.40
Plan 2	4,920,084	2,438,376	201.8%	947.26	469.46
Total	\$37,624,643	\$24,413,917	154.1%	\$679.49	\$440.91
4Q04					
Plan	Total Dollars			Per Member Per Month	
	Incurred Claims	Earned Premium	Loss Ratio	Incurred Claims	Earned Premium
Plan 1A	\$25,082,531	\$11,459,604	218.9%	\$1,023.86	\$467.78
Plan 1B	14,538,749	10,461,572	139.0%	565.45	406.88
Plan 2	5,311,264	2,436,761	218.0%	1,025.34	470.42
Total	\$44,932,545	\$24,357,937	184.5%	\$811.20	\$439.75

NOTES:

Loss Ratio = Incurred Claims / Earned Premiums

Earned Premium includes Premium Subsidies

Incurred Claims include Provider Contributions

Administrative Expenses are not included in this exhibit

Incurred Claims and Earned Premiums are updated quarterly and restated to reflect the most current information available as of March 31, 2005

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan
Financial Report Notes
For the Period Ending May 31, 2005**

The financial statement values for January-November 2004 in this May Monthly Report have been restated from those found in prior monthly reports. The restatements are due to a HIRSP Board of Governors decision to revise HIRSP's definition of program costs. The definition of program costs that HIRSP has been using since 1998 was based on billed charges less a fixed percentage discount for medical (non-pharmacy) services. The discounts vary by service category and the percentages have not changed since 1998.

Due to rising costs in the HIRSP program, the Board adopted a change in the discounts from roughly an aggregate discount of 20% to an aggregate discount of 30%. As a result, the HIRSP U&C was reduced by a multiple of $0.875 (1-0.30)/(1-0.20)$. This change was made retroactively to January 1, 2004. This change is meant to continue through June 30, 2005 when a new methodology for determining future program costs will be implemented.

The following table shows calendar year 2004 under the original basis, the revised basis, and the resulting changes:

HIRSP Summary Impact of Program Changes			
	Original Basis	Revised Basis	Resulting Changes
Total Operating Expenses	\$174,246,511	\$157,076,768	(\$17,169,743)
Required Shares			
Policyholders	\$102,883,919	\$92,582,076	(\$10,301,843)
Providers	36,759,562	33,325,612	(3,433,950)
Insurers	36,759,557	33,325,607	(3,433,950)
Ending Balances			
Policyholders	(\$653,169)	\$9,648,674	\$10,301,843
Providers	12,698,909	(1,036,887)	(13,735,796)
Insurers	1,517,534	4,951,484	3,433,950

The motions adopted by the Board regarding the changes summarized above are as follows:

- 1) Effective January 1, 2004 through June 30, 2005, program costs are to be defined such that the HIRSP medical U&C is 87.5% of the current percentages.
- 2) Convene the Actuarial Advisory Subcommittee for the purpose of advising the FOC and Board regarding a market-based benchmark for program costs for use in establishing the SFY06 Budget.
- 3) The Board acknowledges that the current problem of the growing provider contribution and program costs is a function of several factors including increasing provider charges and provider payment rates not keeping pace with inflation. The Board acknowledges that the above referenced motion is an interim solution and would have recommended a 5% provider payment increase effective March 1, 2005 if not for administrative issues associated with the April 1, 2005 transition of plan administrators. The Board will reduce the SFY06 provider surplus by \$1.5 million to compensate for not changing the provider payment rate effective April 1, 2005.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan
Financial Report Notes
For the Period Ending May 31, 2005**

These monthly reports do not include the June 30, 2002 CAFR¹ (Combined Annual Financial Report) adjustments. When these adjustments are available, the monthly report will reflect these changes. Previously issued monthly reports will not be reissued but the financial statement notes for the current month will summarize the CAFR adjustment.

- 1) **Policyholder Retained Earnings, End of Period (page 3 & 9)**
The policyholder retained earnings include both assigned and unassigned surplus (see Interim Reconciliation page 6 and 12 for the breakdown)
- 2) **Other Receivables (page 7 & 13)**
Claims expense and receivables are adjusted monthly to account for doubtful receivables per GASB 38.
- 3) **Losses Paid or Approved for Payment (page 3 & 9)**
Claims expense and receivables are adjusted monthly to account for doubtful receivables per GASB 38.

¹ CAFR is the State of Wisconsin annual financial report published by DOA (Dept. of Admin.) and prepared in accordance with GASB (Governmental Accounting Standards Board).

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan
for the Period Ended May 31, 2005 (July - November Restated)
Fiscal Year 2005**

Unaudited Statement of Revenues, Expenses, and Changes in Retained Earnings													
Operating Revenues	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
Gross Premiums	7,872,385	8,059,267	8,197,318	8,098,529	7,994,788	8,143,915	8,239,786	8,033,854	8,203,838	8,038,869	7,720,822	-	88,603,371
Premium Subsidized	(332,487)	(337,487)	(355,614)	(355,279)	(358,351)	(359,019)	(354,700)	(328,871)	(306,815)	(348,067)	(353,231)	-	(3,789,921)
Net Premium Revenues	7,539,898	7,721,780	7,841,704	7,743,250	7,636,437	7,784,896	7,885,086	7,704,983	7,897,023	7,690,802	7,367,591	-	84,813,450
Provider Contribution	2,822,174	1,994,216	2,677,124	1,737,174	3,067,418	3,437,726	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	-	28,786,175
Insurer Assessments	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	-	29,729,917
Total Operating Revenues	13,053,434	12,407,358	13,210,190	12,171,786	13,395,217	13,913,984	12,856,478	12,758,399	12,985,593	13,412,979	13,164,124	-	143,329,542
Operating Expenses													
Medical Losses:													
Losses Paid or Approved for Payment ⁽³⁾	9,435,534	7,139,835	5,619,849	10,545,095	8,955,173	12,759,804	8,738,080	8,587,330	6,994,408	5,477,768	10,674,619	-	94,927,495
Increase (Decrease) in Unpaid Losses	1,140,327	(11,402)	3,859,488	(3,260,495)	2,212,678	233,998	(1,174,533)	(984,629)	2,012,472	4,796,581	(459,178)	-	8,365,307
Deductible Subsidy Paid	56,140	35,944	37,736	60,666	34,034	39,816	59,708	78,706	29,706	53,990	95,684	-	582,130
Total Medical Losses	10,632,001	7,164,377	9,517,073	7,345,266	11,201,885	13,033,618	7,623,255	7,681,407	9,036,586	10,328,339	10,311,125	-	103,874,932
Pharmacy Losses:													
Losses Paid or Approved for Payment ⁽⁴⁾	3,455,297	5,261,686	3,541,388	3,670,974	3,732,490	3,773,000	3,656,006	3,495,680	5,402,192	4,013,268	3,757,404	-	43,759,385
Increase (Decrease) in Unpaid Losses	553,645	(1,412,550)	361,325	268,803	516,342	702,134	(178,275)	116,814	(1,607,836)	139,289	154,789	-	(385,520)
Drug Rebates	(91,621)	(136,238)	(229,261)	(107,406)	(108,778)	(172,591)	(122,005)	(120,325)	(230,445)	(214,496)	(234,320)	-	(1,767,486)
Subsidy - Coinsurance Out-of-Pocket Max	19,025	20,562	20,660	31,667	20,879	21,711	12,515	12,515	(8,892)	12,663	22,609	-	185,914
Total Pharmacy Losses	3,936,346	3,733,460	3,694,112	3,864,038	4,160,933	4,324,254	3,368,241	3,504,684	3,555,019	3,950,724	3,700,482	-	41,792,293
Total Losses	14,568,347	10,897,837	13,211,185	11,209,304	15,362,818	17,357,872	10,991,496	11,186,091	12,591,605	14,279,063	14,011,607	-	145,667,225
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses													
WPS Admin Fees	-	-	-	-	-	-	-	-	-	380,950	390,487	-	771,437
Navitus Admin Fees	-	-	-	-	-	-	-	-	-	103,263	105,375	-	208,638
DHFS Admin Fees	38,870	52,788	21,209	22,329	55,715	35,961	23,186	37,147	50,352	18,876	50,258	-	406,691
EDS Admin Fees	72,709	71,453	76,389	74,342	78,537	75,430	76,867	75,812	74,950	(182)	6,974	-	683,281
UGS Admin Fees	245,436	239,647	253,435	241,145	241,777	259,593	239,028	241,709	244,304	-	12,500	-	2,218,574
Milliman USA Actuarial Services	10,500	6,857	8,982	8,103	2,846	16,597	22,888	54,942	25,797	35,041	29,084	-	221,637
Other Admin Fees	12,075	18,441	28,026	51,993	(28,714)	27,894	18,597	12,287	26,803	3,570	5,810	-	176,782
Total Administrative Expenses	379,590	389,186	388,041	397,912	350,161	415,475	380,566	421,897	422,206	541,518	600,488	-	4,687,040
Referral fees	8,785	8,798	7,350	8,575	8,785	9,835	7,035	4,607	7,455	9,380	4,725	-	85,330
Total Operating Expenses	14,956,722	11,295,821	13,606,576	11,615,791	15,721,764	17,783,182	11,379,097	11,612,595	13,021,266	14,829,961	14,616,820	-	150,439,595
Net Operating Income (Loss)	(1,903,288)	1,111,537	(396,386)	555,995	(2,326,547)	(3,869,198)	1,477,381	1,145,804	(35,673)	(1,416,982)	(1,452,696)	-	(7,110,053)
Non-Operating Revenues (Expenses)													
Federal Grant	-	-	-	2,222,903	-	-	-	-	-	-	-	-	2,222,903
Investment income	40,452	39,550	42,044	58,615	63,927	76,234	79,968	67,563	92,323	118,962	125,449	-	805,087
Total Non-operating Revenues (Expenses)	40,452	39,550	42,044	2,281,518	63,927	76,234	79,968	67,563	92,323	118,962	125,449	-	3,027,990
Net Income (Loss)	(1,862,836)	1,151,087	(354,342)	2,837,513	(2,262,620)	(3,792,964)	1,557,349	1,213,367	56,650	(1,298,020)	(1,327,247)	-	(4,082,063)
Additions to Retained Earnings													
Policyholder													
Retained Earnings, Beginning of Period	10,106,007	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	-	10,106,007
Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(957,113)	1,395,914	152,032	2,645,698	(1,312,053)	(2,381,811)	1,575,865	1,252,788	479,775	(681,086)	(784,731)	-	1,385,278
Retained Earnings, End of Period ⁽¹⁾	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	-	11,491,285
Providers													
Retained Earnings, Beginning of Period	883,278	533,405	90,671	(140,437)	(475,457)	(735,256)	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	-	883,278
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(349,873)	(442,734)	(231,108)	(335,020)	(259,799)	(301,631)	(203,800)	(163,741)	(373,220)	(130,401)	(30,194)	-	(2,821,521)
Retained Earnings, End of Period	533,405	90,671	(140,437)	(475,457)	(735,256)	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	-	(1,938,243)
Insurers													
Retained Earnings, Beginning of Period	6,459,308	5,978,623	6,233,036	6,016,166	6,635,334	5,999,479	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	-	6,459,308
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(480,685)	254,413	(216,870)	619,168	(635,855)	(1,047,995)	257,507	215,541	(29,091)	(419,880)	(394,029)	-	(1,877,776)
Retained Earnings, End of Period	5,978,623	6,233,036	6,016,166	6,635,334	5,999,479	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	-	4,581,532
Unfunded Deductible and Coinsurance Subsidy													
Retained Earnings, Beginning of Period	(223,692)	(298,857)	(355,363)	(413,759)	(506,092)	(561,005)	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	-	(223,692)
Current Earnings	(75,165)	(56,506)	(58,396)	(92,333)	(54,913)	(61,527)	(72,223)	(91,221)	(20,814)	(66,653)	(118,293)	-	(768,044)
Retained Earnings, End of Period	(298,857)	(355,363)	(413,759)	(506,092)	(561,005)	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	-	(991,736)
Total Retained Earnings	15,362,065	16,513,152	16,158,810	18,996,323	16,733,703	12,940,739	14,498,088	15,711,455	15,768,105	14,470,085	13,142,838	-	13,142,838

Note: Due to the Board decision to change the definition of program cost on a retrospective basis, various components for July-November 2004 will not match those found in prior monthly reports. Please see the notes provided on page 3 of the Monthly Report for a summary of the changes.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
2005 FISCAL YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSES
AS OF MAY 2005**

MISC REVENUE	JUL 04	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
													-
TOTAL MISC REVENUE	-	-	-	-	-	-	-	-	-	-	-	-	-

MISC ADMIN EXP	JUL 04	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	YEAR TO DATE TOTAL
Bank Service Charge													-
Postage	9,875.07	16,390.65	26,325.77	50,293.38	(30,413.90)	25,518.78	16,896.89	10,586.78	25,102.79				150,576.21
LAB Audit Fee	1,700.00	1,700.00	1,700.00	1,700.00	1,700.00	1,700.00	1,700.00	1,700.00	1,700.00	2,900.00	5,800.00		24,000.00
Speed Scribe													-
UW Extension													-
NASCHIP	500.00	350.00											850.00
Legal Services													-
Prest & Assoc-Ind Med Review						675.00							675.00
Independent Review										600.00			600.00
Premium Refund Overdraft Fees										70.00	10.00		80.00
													-
													-
													-
													-
TOTAL MISC ADMIN EXP	12,075.07	18,440.65	28,025.77	51,993.38	(28,713.90)	27,893.78	18,596.89	12,286.78	26,802.79	3,570.00	5,810.00	-	176,781.21

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan
Fiscal Year 2005 Interim Reconciliation
As Of May 31, 2005 (July - November Restated)**

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Year to Date
1. Operating and Administrative Costs under s.149.143(1)													
Medical Losses Paid or Approved for Payment	9,435,534	7,139,835	5,619,849	10,545,095	8,955,173	12,759,804	8,738,080	8,587,330	6,994,408	5,477,768	10,674,619	-	94,927,495
Increase (Decrease) in Unpaid Medical Losses	1,140,327	(11,402)	3,859,488	(3,260,495)	2,212,678	233,998	(1,174,533)	(984,629)	2,012,472	4,796,581	(459,178)	-	8,365,307
Pharmacy Losses Paid or Approved for Payment	3,455,297	5,261,686	3,541,388	3,670,974	3,732,490	3,773,000	3,656,006	3,495,680	5,402,192	4,013,268	3,757,404	-	43,759,385
Increase (Decrease) in Unpaid Pharmacy Losses	553,645	(1,412,550)	361,325	268,803	516,342	702,134	(178,275)	116,814	(1,607,836)	139,289	154,789	-	(385,520)
Drug Rebates	(91,621)	(136,238)	(229,261)	(107,406)	(108,778)	(172,591)	(122,005)	(120,325)	(230,445)	(214,496)	(234,320)	-	(1,767,486)
Total Administrative Expenses	388,375	397,984	395,391	406,487	358,946	425,310	387,601	426,504	429,661	550,898	605,213	-	4,772,370
Loss Adjustment Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Operating Expense	14,881,557	11,239,315	13,548,180	11,523,458	15,666,851	17,721,655	11,306,874	11,521,374	13,000,452	14,763,308	14,498,527	-	149,671,551
2. Adjustments to Operating and Administrative Costs													
Total Non-operating Revenue (Expense)	40,452	39,550	42,044	2,281,518	63,927	76,234	79,968	67,563	92,323	118,962	125,449	-	3,027,990
3. Total Fiscal Year Program Costs to be Split 60% 20% 20%	14,841,105	11,199,765	13,506,136	9,241,940	15,602,924	17,645,421	11,226,906	11,453,811	12,908,129	14,644,346	14,373,078	-	146,643,561
4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Excluding Subsidy Costs)													
Funding Shares													
60% Policyholders	8,904,663	6,719,859	8,103,682	5,545,164	9,361,754	10,587,253	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	-	87,986,137
20% Providers	2,968,221	2,239,953	2,701,227	1,848,388	3,120,585	3,529,084	2,245,381	2,290,762	2,581,626	2,928,869	2,874,616	-	29,328,712
20% Insurers	2,968,221	2,239,953	2,701,227	1,848,388	3,120,585	3,529,084	2,245,381	2,290,762	2,581,626	2,928,869	2,874,616	-	29,328,712
5. Subsidy Funding Shares													
Premium subsidies	332,487	337,487	355,614	355,279	358,351	359,019	354,700	328,871	306,815	348,067	353,231	-	3,789,921
Deductible Subsidies	56,140	35,944	37,736	60,666	34,034	39,816	59,708	78,706	29,706	53,990	95,684	-	582,130
Subsidy - coinsurance out-of-pocket Max	19,025	20,562	20,660	31,667	20,879	21,711	12,515	12,515	(8,892)	12,663	22,609	-	185,914
Total Subsidies	407,652	393,993	414,010	447,612	413,264	420,546	426,923	420,092	327,629	414,720	471,524	-	4,557,965
Subsidy Funding Needed by Source in addition to Section 3 Funding Shares													
Providers	203,826	196,997	207,005	223,806	206,632	210,273	213,462	210,046	163,815	207,360	235,762	-	2,278,984
Insurers	203,826	196,996	207,005	223,806	206,632	210,273	213,461	210,046	163,814	207,360	235,762	-	2,278,981
6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Including Subsidy Costs)													
Policyholders	8,904,663	6,719,859	8,103,682	5,545,164	9,361,754	10,587,253	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	-	87,986,137
Providers	3,172,047	2,436,950	2,908,232	2,072,194	3,327,217	3,739,357	2,458,843	2,500,808	2,745,441	3,136,229	3,110,378	-	31,607,696
Insurers	3,172,047	2,436,949	2,908,232	2,072,194	3,327,217	3,739,357	2,458,842	2,500,808	2,745,440	3,136,229	3,110,378	-	31,607,693
7. Non-GPR Revenues by Source Including GPR Subsidies Under s.20.435(4)(ah)													
Policyholders													
Premium	7,539,898	7,721,780	7,841,704	7,743,250	7,636,437	7,784,896	7,885,086	7,704,983	7,897,023	7,690,802	7,367,591	-	84,813,450
Premium and Deductible Subsidies Credited to Policyholders	407,652	393,993	414,010	447,612	413,264	420,546	426,923	420,092	327,629	414,720	471,524	-	4,557,965
Subtotal	7,947,550	8,115,773	8,255,714	8,190,862	8,049,701	8,205,442	8,312,009	8,125,075	8,224,652	8,105,522	7,839,115	-	89,371,415
Providers	2,822,174	1,994,216	2,677,124	1,737,174	3,067,418	3,437,726	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	-	28,786,175
Insurers	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	-	29,729,917
Total	13,461,086	12,801,351	13,624,200	12,619,398	13,808,481	14,334,530	13,283,401	13,178,491	13,313,222	13,827,699	13,635,648	-	147,887,507

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

8. Interim Estimate of Surplus/(Deficit) Account Balance for FY 2005

Policyholders													
Prior Period Surplus / (Deficit)	10,106,007	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	-	10,106,007
Premium (Including Premium and Deductible Subsidies)	7,947,550	8,115,773	8,255,714	8,190,862	8,049,701	8,205,442	8,312,009	8,125,075	8,224,652	8,105,522	7,839,115	-	89,371,415
Less Cost	8,904,663	6,719,859	8,103,682	5,545,164	9,361,754	10,587,253	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	-	87,986,137
Less Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(957,113)	1,395,914	152,032	2,645,698	(1,312,053)	(2,381,811)	1,575,865	1,252,788	479,775	(681,086)	(784,731)	-	1,385,278
Ending Surplus / (Deficit)	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	-	11,491,285
Assigned Surplus to SFY 2005	-	-	-	-	-	-	-	-	-	-	-	-	-
Unassigned Surplus	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	-	11,491,285
Providers													
Prior Period Surplus / (Deficit)	883,278	533,405	90,671	(140,437)	(475,457)	(735,256)	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	-	883,278
Contribution	2,822,174	1,994,216	2,677,124	1,737,174	3,067,418	3,437,726	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	-	28,786,175
Less Cost	3,172,047	2,436,950	2,908,232	2,072,194	3,327,217	3,739,357	2,458,843	2,500,808	2,745,441	3,136,229	3,110,378	-	31,607,696
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(349,873)	(442,734)	(231,108)	(335,020)	(259,799)	(301,631)	(203,800)	(163,741)	(373,220)	(130,401)	(30,194)	-	(2,821,521)
Ending Surplus / (Deficit)	533,405	90,671	(140,437)	(475,457)	(735,256)	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	-	(1,938,243)
Insurers													
Prior Period Surplus / (Deficit)	6,459,308	5,978,623	6,233,036	6,016,166	6,635,334	5,999,479	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	-	6,459,308
Assessment	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,691,362	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	-	29,729,917
Less Cost	3,172,047	2,436,949	2,908,232	2,072,194	3,327,217	3,739,357	2,458,842	2,500,808	2,745,440	3,136,229	3,110,378	-	31,607,693
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(480,685)	254,413	(216,870)	619,168	(635,855)	(1,047,995)	257,507	215,541	(29,091)	(419,880)	(394,029)	-	(1,877,776)
Ending Surplus / (Deficit)	5,978,623	6,233,036	6,016,166	6,635,334	5,999,479	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	-	4,581,532
Unfunded Deductible and Coinsurance Subsidy													
Prior Period Surplus / (Deficit)	(223,692)	(298,857)	(355,363)	(413,759)	(506,092)	(561,005)	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	-	(223,692)
Monthly Change	(75,165)	(56,506)	(58,396)	(92,333)	(54,913)	(61,527)	(72,223)	(91,221)	(20,814)	(66,653)	(118,293)	-	(768,044)
Ending Surplus / (Deficit)	(298,857)	(355,363)	(413,759)	(506,092)	(561,005)	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	-	(991,736)
Total HIRSP Retained Earnings	15,362,065	16,513,152	16,158,810	18,996,323	16,733,703	12,940,739	14,498,088	15,711,455	15,768,105	14,470,085	13,142,838	-	13,142,838

Note: Due to the Board decision to change the definition of program cost on a retrospective basis, various components for July-November 2004 will not match those found in prior monthly reports!

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan
May 31, 2005 (July - November Restated)
Fiscal Year 2005**

Unaudited Balance Sheet

Assets	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
Cash and Cash Equivalents	44,175,497	43,792,481	55,529,616	53,382,423	45,505,246	50,307,256	43,348,568	47,057,865	53,789,891	57,009,607	48,034,750	-
Other Receivables ⁽²⁾	39,541	109,277	138,752	200,118	136,931	111,735	96,643	125,560	94,016	1,742,701	1,472,644	-
Drug Rebates Receivable	694,465	830,703	1,059,964	1,167,370	1,276,148	1,124,746	1,246,751	1,051,895	1,282,340	1,496,835	1,344,382	-
Assessments Receivable	2,781,901	896,397	348,845	742,609	516,473	641,364	3,357,262	94,485	217,131	97,932	85,013	-
Prepaid Items	57,739	71,349	45,023	34,879	95,293	69,774	52,878	42,291	17,188	1,280	-	-
Total Assets	47,749,143	45,700,207	57,122,200	55,527,399	47,530,091	52,254,875	48,102,102	48,372,096	55,400,566	60,348,355	50,936,789	-
Liabilities and Fund Equity												
Liabilities:												
Unpaid Medical loss Liabilities	16,129,059	16,120,582	18,992,225	16,540,725	18,210,671	18,388,346	17,498,548	16,751,485	18,285,381	21,908,176	21,560,577	-
Unpaid Prescription Drug Loss Liabilities	2,198,353	785,803	1,147,128	1,415,931	1,932,273	2,634,407	2,456,132	2,572,946	965,110	2,584,048	2,863,469	-
Unpaid Loss Adjustment Expense	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000	660,000	-
Unearned Premiums	12,626,044	6,831,139	16,957,036	12,608,063	6,784,926	16,833,222	12,599,991	7,023,489	16,764,621	14,630,761	9,063,254	-
Unearned Assessments	-	3,966,257	2,604,678	4,463,813	2,605,723	-	2,260	5,010,790	2,537,883	5,432,699	2,716,349	-
Accounts Payable and Other Accrued Liabilities	773,622	823,274	602,323	842,544	602,795	798,161	387,083	641,931	419,466	662,586	930,302	-
Total Liabilities	32,387,078	29,187,055	40,963,390	36,531,076	30,796,388	39,314,136	33,604,014	32,660,641	39,632,461	45,878,270	37,793,951	-
Fund Equity:												
Policyholder	9,148,894	10,544,808	10,696,840	13,342,538	12,030,485	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	-
Providers	533,405	90,671	(140,437)	(475,457)	(735,256)	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	-
Insurers	5,978,623	6,233,036	6,016,166	6,635,334	5,999,479	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	-
Unfunded Deductible and Coinsurance Subsidy	(298,857)	(355,363)	(413,759)	(506,092)	(561,005)	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	-
Total Retained Earnings	15,362,065	16,513,152	16,158,810	18,996,323	16,733,703	12,940,739	14,498,088	15,711,455	15,768,105	14,470,085	13,142,838	-
Total Liabilities and Fund Equity	47,749,143	45,700,207	57,122,200	55,527,399	47,530,091	52,254,875	48,102,102	48,372,096	55,400,566	60,348,355	50,936,789	-

**Note Due to the Board decision to change the definition of program cost on a retrospective basis, the fund equity components for July-November 2004 will not match those found in prior monthly reports.
Please see the notes provided on page 3 of the Monthly Report for a summary of the changes.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
MONTHLY PROVIDER CONTRIBUTION REPORT
AS OF MAY 2005 MONTH END(5/26/2005)**

Provider Share Calculation for the Current Month - Claims by Claim Type					
Regular Claims					
Claim Type	Billed Charges	U&C Percentage	Usual and Customary	Less HIRSP Allowed Charges	Provider Share
Professional	\$ 8,742,382.19	36.0%	\$ 5,599,495.79	\$ 3,726,712.89	\$ 1,872,782.90
Hospital Outpatient	\$ 4,187,364.80	27.5%	\$ 3,037,430.68	\$ 2,579,648.47	\$ 457,782.21
Hospital Inpatient	\$ 5,120,549.91	28.1%	\$ 3,681,163.33	\$ 2,915,758.23	\$ 765,405.10
Nursing Home	\$ 59,114.31	23.9%	\$ 44,997.81	\$ 31,625.80	\$ 13,372.01
Other	\$ 1,008,562.66	23.9%	\$ 767,717.90	\$ 695,406.98	\$ 72,310.92
Total	\$ 19,117,973.87		\$ 13,130,805.51	\$ 9,949,152.37	\$ 3,181,653.14

Crossover Claims					
Claim Type	Medicare Allowed Charges	Medicare Paid	HIRSP Paid	HIRSP Deductible/ Coinsurance	Provider Share
Professional	\$ 736,450.43	\$ 516,123.68	\$ 150,150.31	\$ 62,003.57	\$ 8,172.87
Hospital Outpatient	\$ 660,636.62	\$ 488,429.83	\$ 134,750.54	\$ 37,995.68	\$ (539.43)
Hospital Inpatient	\$ 704,602.10	\$ 618,671.82	\$ 75,406.48	\$ 8,833.80	\$ 1,690.00
Nursing Home	\$ 79,653.26	\$ 64,064.60	\$ 14,828.16	\$ 226.50	\$ 534.00
Other	\$ 210,648.53	\$ 147,898.13	\$ 47,278.15	\$ 15,219.84	\$ 252.41
Total	\$ 2,391,990.94	\$ 1,835,188.06	\$ 422,413.64	\$ 124,279.39	\$ 10,109.85

Provider Contribution on the Increase(Decrease) in Unpaid Losses	\$ (111,579.00)
--	-----------------

Total Provider Contribution Non-Pharmacy	\$ 3,080,183.99
--	-----------------

Pharmacy Claims					
Claim Type	Billed Charges	U&C Percentage	Usual and Customary	Less HIRSP Allowed Charges	Provider Share
Prescription Drug not processed by PBM	\$ -	0.0%			\$ -
Prescription Drug processed by PBM	\$ 5,661,245.66	0.0%	\$ 4,170,852.00	\$ 4,170,852.00	\$ -
Total Provider Contribution Pharmacy	\$ 5,661,245.66		\$ 4,170,852.00	\$ 4,170,852.00	\$ -

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**Wisconsin Health Insurance Risk Sharing Plan
for the Period Ended May 31, 2005
Calendar Year 2005**

Unaudited Statement of Revenues, Expenses, and Changes in Retained Earnings													
Operating Revenues	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
Gross Premiums	8,239,786	8,033,854	8,203,838	8,038,869	7,720,822	-	-	-	-	-	-	-	40,237,169
Premium Subsidized	(354,700)	(328,871)	(306,815)	(348,067)	(353,231)	-	-	-	-	-	-	-	(1,691,684)
Net Premium Revenues	7,885,086	7,704,983	7,897,023	7,690,802	7,367,591	-	-	-	-	-	-	-	38,545,485
Provider Contribution	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	-	-	-	-	-	-	-	13,050,343
Insurer Assessments	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	-	-	-	-	-	-	-	13,581,745
Total Operating Revenues	12,856,478	12,758,399	12,985,593	13,412,979	13,164,124	-	-	-	-	-	-	-	65,177,573
Operating Expenses													
Medical Losses:													
Losses Paid or Approved for Payment ⁽³⁾	8,738,080	8,587,330	6,994,408	5,477,768	10,674,619	-	-	-	-	-	-	-	40,472,205
Increase (Decrease) in Unpaid Losses	(1,174,533)	(984,629)	2,012,472	4,796,581	(459,178)	-	-	-	-	-	-	-	4,190,713
Deductible Subsidy Paid	59,708	78,706	29,706	53,990	95,684	-	-	-	-	-	-	-	317,794
Total Medical Losses	7,623,255	7,681,407	9,036,586	10,328,339	10,311,125	-	-	-	-	-	-	-	44,980,712
Pharmacy Losses:													
Losses Paid or Approved for Payment	3,656,006	3,495,680	5,402,192	4,013,268	3,757,404	-	-	-	-	-	-	-	20,324,550
Increase (Decrease) in Unpaid Losses	(178,275)	116,814	(1,607,836)	139,289	154,789	-	-	-	-	-	-	-	(1,375,219)
Drug Rebates	(122,005)	(120,325)	(230,445)	(214,496)	(234,320)	-	-	-	-	-	-	-	(921,591)
Subsidy - Coinsurance Out-of-Pocket Max	12,515	12,515	(8,892)	12,663	22,609	-	-	-	-	-	-	-	51,410
Total Pharmacy Losses	3,368,241	3,504,684	3,555,019	3,950,724	3,700,482	-	-	-	-	-	-	-	18,079,150
Total Losses	10,991,496	11,186,091	12,591,605	14,279,063	14,011,607	-	-	-	-	-	-	-	63,059,862
Loss adjustment expenses	-	-	-	-	-	-	-	-	-	-	-	-	-
Administrative expenses													
WPS Admin Fees	-	-	-	380,950	390,487	-	-	-	-	-	-	-	771,437
Navitus Admin Fees	-	-	-	103,263	105,375	-	-	-	-	-	-	-	208,638
DHFS Admin Fees	23,186	37,147	50,352	18,876	50,258	-	-	-	-	-	-	-	179,819
EDS Admin Fees	76,867	75,812	74,950	(182)	6,974	-	-	-	-	-	-	-	234,421
UGS Admin Fees	239,028	241,709	244,304	-	12,500	-	-	-	-	-	-	-	737,541
Milliman USA Actuarial Services	22,888	54,942	25,797	35,041	29,084	-	-	-	-	-	-	-	167,752
Other Admin Fees	18,597	12,287	26,803	3,570	5,810	-	-	-	-	-	-	-	67,067
Total Administrative Expenses	380,566	421,897	422,206	541,518	600,488	-	-	-	-	-	-	-	2,366,675
Referral fees	7,035	4,607	7,455	9,380	4,725	-	-	-	-	-	-	-	33,202
Total Operating Expenses	11,379,097	11,612,595	13,021,266	14,829,961	14,616,820	-	-	-	-	-	-	-	65,459,739
Net Operating Income (Loss)	1,477,381	1,145,804	(35,673)	(1,416,982)	(1,452,696)	-	-	-	-	-	-	-	(282,166)
Non-Operating Revenues (Expenses)													
Federal Grant	-	-	-	-	-	-	-	-	-	-	-	-	-
Investment income	79,968	67,563	92,323	118,962	125,449	-	-	-	-	-	-	-	484,265
Total Non-operating Revenues (Expenses)	79,968	67,563	92,323	118,962	125,449	-	-	-	-	-	-	-	484,265
Net Income (Loss)	1,557,349	1,213,367	56,650	(1,298,020)	(1,327,247)	-	-	-	-	-	-	-	202,099
Additions to Retained Earnings													
Policyholder													
Retained Earnings, Beginning of Period	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	-	-	-	-	-	-	-	9,648,674
Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	1,575,865	1,252,788	479,775	(681,086)	(784,731)	-	-	-	-	-	-	-	1,842,611
Retained Earnings, End of Period⁽¹⁾	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	-	-	-	-	-	-	-	11,491,285
Providers													
Retained Earnings, Beginning of Period	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	-	-	-	-	-	-	-	(1,036,887)
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	(203,800)	(163,741)	(373,220)	(130,401)	(30,194)	-	-	-	-	-	-	-	(901,356)
Retained Earnings, End of Period	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	-	-	-	-	-	-	-	(1,938,243)
Insurers													
Retained Earnings, Beginning of Period	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	-	-	-	-	-	-	-	4,951,484
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Current Earnings	257,507	215,541	(29,091)	(419,880)	(394,029)	-	-	-	-	-	-	-	(369,952)
Retained Earnings, End of Period	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	-	-	-	-	-	-	-	4,581,532
Unfunded Deductible and Coinsurance Subsidy													
Retained Earnings, Beginning of Period	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	-	-	-	-	-	-	-	(622,532)
Current Earnings	(72,223)	(91,221)	(20,814)	(66,653)	(118,293)	-	-	-	-	-	-	-	(369,204)
Retained Earnings, End of Period	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	-	-	-	-	-	-	-	(991,736)
Total Retained Earnings	14,498,088	15,711,455	15,768,105	14,470,085	13,142,838	-	-	-	-	-	-	-	13,142,838

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
2005 CALENDAR YEAR DETAIL OF MISC REVENUE & ADMIN EXPENSES
AS OF MAY 2005**

MISC REVENUE	JAN 05	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YEAR TO DATE TOTAL
													-
													-
													-
													-
													-
													-
													-
TOTAL MISC REVENUE	-	-	-	-	-	-	-	-	-	-	-	-	-

MISC ADMIN EXP	JAN 05	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YEAR TO DATE TOTAL
Bank Service Charge													-
Postage	16,896.89	10,586.78	25,102.79										52,586.46
LAB Audit Fee	1,700.00	1,700.00	1,700.00	2,900.00	5,800.00								13,800.00
Speed Scribe													-
UW Extension													-
NASCHIP													-
Legal Services													-
Prest & Assoc-Ind Med Review													-
Independent Review				600.00									600.00
Premium Refund Overdraft Fees				70.00	10.00								80.00
													-
													-
													-
													-
													-
TOTAL MISC ADMIN EXP	18,596.89	12,286.78	26,802.79	3,570.00	5,810.00	-	-	-	-	-	-	-	67,066.46

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

Wisconsin Health Insurance Risk Sharing Plan
Calendar Year 2005 Interim Reconciliation
As Of May 31, 2005

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Year to Date
1. Operating and Administrative Costs under s.149.143(1)													
Medical Losses Paid or Approved for Payment	8,738,080	8,587,330	6,994,408	5,477,768	10,674,619	-	-	-	-	-	-	-	40,472,205
Increase (Decrease) in Unpaid Medical Losses	(1,174,533)	(984,629)	2,012,472	4,796,581	(459,178)	-	-	-	-	-	-	-	4,190,713
Pharmacy Losses Paid or Approved for Payment	3,656,006	3,495,680	5,402,192	4,013,268	3,757,404	-	-	-	-	-	-	-	20,324,550
Increase (Decrease) in Unpaid Pharmacy Losses	(178,275)	116,814	(1,607,836)	139,289	154,789	-	-	-	-	-	-	-	(1,375,219)
Drug Rebates	(122,005)	(120,325)	(230,445)	(214,496)	(234,320)	-	-	-	-	-	-	-	(921,591)
Total Administrative Expenses	387,601	426,504	429,661	550,898	605,213	-	-	-	-	-	-	-	2,399,877
Loss Adjustment Expense	-	-	-	-	-	-	-	-	-	-	-	-	-
Total Operating Expense	11,306,874	11,521,374	13,000,452	14,763,308	14,498,527	-	-	-	-	-	-	-	65,090,535
2. Adjustments to Operating and Administrative Costs													
Total Non-operating Revenue (Expense)	79,968	67,563	92,323	118,962	125,449	-	-	-	-	-	-	-	484,265
3. Total Fiscal Year Program Costs to be Split 60% 20% 20%	11,226,906	11,453,811	12,908,129	14,644,346	14,373,078	-	-	-	-	-	-	-	64,606,270
4. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Excluding Subsidy Costs)													
Funding Shares													
60% Policyholders	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	-	-	-	-	-	-	-	38,763,762
20% Providers	2,245,381	2,290,762	2,581,626	2,928,869	2,874,616	-	-	-	-	-	-	-	12,921,254
20% Insurers	2,245,381	2,290,762	2,581,626	2,928,869	2,874,616	-	-	-	-	-	-	-	12,921,254
5. Subsidy Funding Shares													
Premium subsidies	354,700	328,871	306,815	348,067	353,231	-	-	-	-	-	-	-	1,691,684
Deductible Subsidies	59,708	78,706	29,706	53,990	95,684	-	-	-	-	-	-	-	317,794
Subsidy - coinsurance out-of-pocket Max	12,515	12,515	(8,892)	12,663	22,609	-	-	-	-	-	-	-	51,410
Total Subsidies	426,923	420,092	327,629	414,720	471,524	-	-	-	-	-	-	-	2,060,888
Subsidy Funding Needed by Source in addition to Section 3 Funding Shares													
Providers	213,462	210,046	163,815	207,360	235,762	-	-	-	-	-	-	-	1,030,445
Insurers	213,461	210,046	163,814	207,360	235,762	-	-	-	-	-	-	-	1,030,443
6. Year-to-Date Adjusted Program Costs Under s.149.143(1) (Including Subsidy Costs)													
Policyholders	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	-	-	-	-	-	-	-	38,763,762
Providers	2,458,843	2,500,808	2,745,441	3,136,229	3,110,378	-	-	-	-	-	-	-	13,951,699
Insurers	2,458,842	2,500,808	2,745,440	3,136,229	3,110,378	-	-	-	-	-	-	-	13,951,697
7. Non-GPR Revenues by Source Including GPR Subsidies Under s.20.435(4)(ah)													
Policyholders													
Premium	7,885,086	7,704,983	7,897,023	7,690,802	7,367,591	-	-	-	-	-	-	-	38,545,485
Premium and Deductible Subsidies Credited to Policyholders	426,923	420,092	327,629	414,720	471,524	-	-	-	-	-	-	-	2,060,888
Subtotal	8,312,009	8,125,075	8,224,652	8,105,522	7,839,115	-	-	-	-	-	-	-	40,606,373
Providers	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	-	-	-	-	-	-	-	13,050,343
Insurers	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	-	-	-	-	-	-	-	13,581,745
Total	13,283,401	13,178,491	13,313,222	13,827,699	13,635,648	-	-	-	-	-	-	-	67,238,461

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

8. Interim Estimate of Surplus/(Deficit) Account Balance for FY 2005

Policyholders													
Prior Period Surplus / (Deficit)	9,648,674	11,224,539	12,477,327	12,957,102	12,276,016	-	-	-	-	-	-	-	9,648,674
Premium (Including Premium and Deductible Subsidies)	8,312,009	8,125,075	8,224,652	8,105,522	7,839,115	-	-	-	-	-	-	-	40,606,373
Less Cost	6,736,144	6,872,287	7,744,877	8,786,608	8,623,846	-	-	-	-	-	-	-	38,763,762
Less Unfunded Policyholder Subsidies	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	1,575,865	1,252,788	479,775	(681,086)	(784,731)	-	-	-	-	-	-	-	1,842,611
Ending Surplus / (Deficit)	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	-	-	-	-	-	-	-	11,491,285
Assigned Surplus to SFY 2005	-	-	-	-	-	-	-	-	-	-	-	-	-
Unassigned Surplus	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	-	-	-	-	-	-	-	11,491,285
Providers													
Prior Period Surplus / (Deficit)	(1,036,887)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	-	-	-	-	-	-	-	(1,036,887)
Contribution	2,255,043	2,337,067	2,372,221	3,005,828	3,080,184	-	-	-	-	-	-	-	13,050,343
Less Cost	2,458,843	2,500,808	2,745,441	3,136,229	3,110,378	-	-	-	-	-	-	-	13,951,699
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	(203,800)	(163,741)	(373,220)	(130,401)	(30,194)	-	-	-	-	-	-	-	(901,356)
Ending Surplus / (Deficit)	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	-	-	-	-	-	-	-	(1,938,243)
Insurers													
Prior Period Surplus / (Deficit)	4,951,484	5,208,991	5,424,532	5,395,441	4,975,561	-	-	-	-	-	-	-	4,951,484
Assessment	2,716,349	2,716,349	2,716,349	2,716,349	2,716,349	-	-	-	-	-	-	-	13,581,745
Less Cost	2,458,842	2,500,808	2,745,440	3,136,229	3,110,378	-	-	-	-	-	-	-	13,951,697
Premium Subsidy Underpayment Adj.	-	-	-	-	-	-	-	-	-	-	-	-	-
Monthly Change	257,507	215,541	(29,091)	(419,880)	(394,029)	-	-	-	-	-	-	-	(369,952)
Ending Surplus / (Deficit)	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	-	-	-	-	-	-	-	4,581,532
Unfunded Deductible and Coinsurance Subsidy													
Prior Period Surplus / (Deficit)	(622,532)	(694,755)	(785,976)	(806,790)	(873,443)	-	-	-	-	-	-	-	(622,532)
Monthly Change	(72,223)	(91,221)	(20,814)	(66,653)	(118,293)	-	-	-	-	-	-	-	(369,204)
Ending Surplus / (Deficit)	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	-	-	-	-	-	-	-	(991,736)
Total HIRSP Retained Earnings	14,498,088	15,711,455	15,768,105	14,470,085	13,142,838	-	-	-	-	-	-	-	13,142,838

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

Wisconsin Health Insurance Risk Sharing Plan
May 31, 2005
Calendar Year 2005

Unaudited Balance Sheet

Assets	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Cash and Cash Equivalents	43,348,568	47,057,865	53,789,891	57,009,607	48,034,750	-	-	-	-	-	-	-
Other Receivables ⁽²⁾	96,643	125,560	94,016	1,742,701	1,472,644	-	-	-	-	-	-	-
Drug Rebates Receivable	1,246,751	1,051,895	1,282,340	1,496,835	1,344,382	-	-	-	-	-	-	-
Assessments Receivable	3,357,262	94,485	217,131	97,932	85,013	-	-	-	-	-	-	-
Prepaid Items	52,878	42,291	17,188	1,280	-	-	-	-	-	-	-	-
Total Assets	48,102,102	48,372,096	55,400,566	60,348,355	50,936,789	-	-	-	-	-	-	-
Liabilities and Fund Equity	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Liabilities:												
Unpaid Medical loss Liabilities	17,498,548	16,751,485	18,285,381	21,908,176	21,560,577	-	-	-	-	-	-	-
Unpaid Prescription Drug Loss Liabilities	2,456,132	2,572,946	965,110	2,584,048	2,863,469	-	-	-	-	-	-	-
Unpaid Loss Adjustment Expense	660,000	660,000	660,000	660,000	660,000	-	-	-	-	-	-	-
Unearned Premiums	12,599,991	7,023,489	16,764,621	14,630,761	9,063,254	-	-	-	-	-	-	-
Unearned Assessments	2,260	5,010,790	2,537,883	5,432,699	2,716,349	-	-	-	-	-	-	-
Accounts Payable and Other Accrued Liabilities	387,083	641,931	419,466	662,586	930,302	-	-	-	-	-	-	-
Total Liabilities	33,604,014	32,660,641	39,632,461	45,878,270	37,793,951	-	-	-	-	-	-	-
Fund Equity:												
Policyholder	11,224,539	12,477,327	12,957,102	12,276,016	11,491,285	-	-	-	-	-	-	-
Providers	(1,240,687)	(1,404,428)	(1,777,648)	(1,908,049)	(1,938,243)	-	-	-	-	-	-	-
Insurers	5,208,991	5,424,532	5,395,441	4,975,561	4,581,532	-	-	-	-	-	-	-
Unfunded Deductible and Coinsurance Subsidy	(694,755)	(785,976)	(806,790)	(873,443)	(991,736)	-	-	-	-	-	-	-
Total Retained Earnings	14,498,088	15,711,455	15,768,105	14,470,085	13,142,838	-	-	-	-	-	-	-
Total Liabilities and Fund Equity	48,102,102	48,372,096	55,400,566	60,348,355	50,936,789	-	-	-	-	-	-	-

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

EARNED PREMIUM

FISCAL YEAR 2005

EARNED PREMIUM	
MONTH	FY 05
JUL	7,539,898
AUG	7,721,780
SEP	7,841,704
OCT	7,743,250
NOV	7,636,437
DEC	7,784,896
JAN	7,885,086
FEB	7,704,983
MAR	7,897,023
APR	7,690,802
MAY	7,367,591
JUN	
TOTAL	\$ 84,813,450

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

Wisconsin Health Insurance Risk Sharing Plan
January 2005 Assessment Status

Total Assessment Amount: \$16,481,262.21 \$8,240,631.04			1st Installment Due 03/01/2005 Assessment Amount: \$8,240,631.17		2nd Installment Due 05/01/2005 Assessment Amount:	
Period Ending	Payments Received	A/R Balance	Payments Received	A/R Balance	Payments Received	A/R Balance
2005 01	\$2,711.96	\$16,478,550.25	\$1,355.99	\$8,239,275.18	\$1,355.97	\$8,239,275.07
2005 02	\$10,614,378.03	\$5,864,172.22	\$8,133,345.66	\$105,929.52	\$2,481,032.37	\$5,758,242.70
2005 03	\$120,796.35	\$5,743,375.87	\$65,302.23	\$40,627.29	\$55,494.12	\$5,702,748.58
2005 04	\$5,730,364.43	\$13,011.44	\$40,581.38	\$45.91	\$5,689,783.05	\$12,965.53
2005 05	\$12,918.97	\$92.47	\$0.00	\$45.91	\$12,918.97	\$46.56
Grand Total	\$16,481,169.74	\$92.47	\$8,240,585.26	\$45.91	\$8,240,584.48	\$46.56

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Monthly Applicant Activity For May 2005

Number of Applications Pending	April	951
Number of Applications Received	May	648
Number of Applications Rejected	May	316
Number of Applications Closed	May	64
Number of Applications Pending	May	671
Number of Applications Approved		548

Detail of Applications Rejected

Eligible for Group Health Coverage	13
Current Medicaid Coverage	1
Not a Wisconsin Resident	5
Did not Qualify for lost Employer Coverage	36
65 or Older	4
Previous HIRSP < 12 Months Ago	7
Currently Covered by Other Insurance	137
No Medical Reason	113
Insufficient Premium Submitted	0
Total	316

Detail of Applications Closed

Applicant Request	28
Proper Eligibility Requested, never received	12
Application Data Requested, never received	24
Total	64

Due to a programming error, the pending application numbers in this report are overstated.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Monthly Applicant Activity

May, 2005

A.	Medicare Eligible	3
B.	HIV +	2
C.	Eligible Individual	231
D.	Letter of Medical Eligibility	312
1.	Letter of Rejection By:	
	Alliance Insurance	1
	American Family	17
	American Medical Security Group	5
	American Republic	5
	Atrium Health Plan	7
	Blue Cross & Blue Shield United of Wisconsin	87
	Central Reserve Life Insurance	2
	Continental General Insurance Company	1
	Dean Health Plan	2
	Fortis Benefits Insurance	28
	Golden Rule Insurance Company	19
	Group Health Cooperative	1
	Humana Insurance Company	47
	John Alden Life Insurance	3
	Mega Life and Health Insurance	30
	Mid-West National Life Insurance Company of	3
	Midwest Security Life Insurance	6
	Pekin Life Insurance	1
	Security Health Plan	10
	United HealthCare Insurance	1
	Unity Health Plan	3
	Valley Health Plan	1
	Wisconsin Physicians Service Insurance	31
2.	Notice of Benefit Reduction	0
3.	Notice of Premium increase due to a Health Reason	0
Total		548

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Restated Monthly Enrollment Through May 2005 Month End

	Total Subsidy				Total Non-Subsidy					Combined Total			
	Plan 1A	Plan 2	Total		Plan 1A	Plan 1B	Plan 2	Total		Plan 1A	Plan 1B	Plan 2	Total
June 2004	3,193	796	3,989		5,173	8,361	967	14,501		8,366	8,361	1,763	18,490
July 2004	2,962	739	3,701		5,271	8,319	988	14,578		8,233	8,319	1,727	18,279
August 2004	2,985	746	3,731		5,245	8,429	987	14,661		8,230	8,429	1,733	18,392
September 2004	2,987	751	3,738		5,241	8,499	982	14,722		8,228	8,499	1,733	18,460
October 2004	3,000	764	3,764		5,123	8,477	960	14,560		8,123	8,477	1,724	18,324
November 2004	2,988	768	3,756		5,140	8,507	964	14,611		8,128	8,507	1,732	18,367
December 2004	3,002	765	3,767		5,151	8,582	958	14,691		8,153	8,582	1,723	18,458
January 2005	2,954	749	3,703		4,719	9,126	953	14,798		7,673	9,126	1,702	18,501
February 2005	2,948	747	3,695		4,755	9,215	961	14,931		7,703	9,215	1,708	18,626
March 2005	2,964	745	3,709		4,828	9,344	958	15,130		7,792	9,344	1,703	18,839
April 2005	2,976	753	3,729		4,869	9,458	966	15,293		7,845	9,458	1,719	19,022
May 2005	2,990	747	3,737		4,916	9,544	962	15,422		7,906	9,544	1,709	19,159

Detail of Total Subsidy Policies in Force as of May Month End

	Level 0	Level 1	Level 2	Level 3	Level 4	Level 5	Total
June 2004	14,501	537	589	747	1,545	571	18,490
July 2004	14,578	550	544	663	1,367	577	18,279
August 2004	14,661	547	554	664	1,394	572	18,392
September 2004	14,722	551	555	666	1,395	571	18,460
October 2004	14,560	553	546	676	1,423	566	18,324
November 2004	14,611	553	540	677	1,428	558	18,367
December 2004	14,691	554	541	683	1,431	558	18,458
January 2005	14,798	532	526	675	1,449	521	18,501
February 2005	14,931	523	523	675	1,459	515	18,626
March 2005	15,130	526	522	680	1,469	512	18,839
April 2005	15,293	525	523	685	1,486	510	19,022
May 2005	15,422	528	525	685	1,490	509	19,159

Level 0 = Income > \$25,000

Level 1 = Income \$17,000-\$19,999

Level 2 = Income \$14,000-\$16,999

Level 3 = Income \$10,000-\$13,999

Level 4 = Income < or equal to \$9,999

Level 5 = Income \$20,000-\$24,999

*** Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Total Policies in Force by Plan, Gender and Age Group as of May 2005 Month End

Male

Plan	Gender	Age Group	Number of Policyholders
1A	Male	0-24	438
1A	Male	25-29	228
1A	Male	30-34	187
1A	Male	35-39	255
1A	Male	40-44	430
1A	Male	45-49	491
1A	Male	50-54	544
1A	Male	55-59	484
1A	Male	60-64	456
1A	Male	65+	12
Total			3,525

Plan	Gender	Age Group	Number of Policyholders
1B	Male	0-24	277
1B	Male	25-29	61
1B	Male	30-34	78
1B	Male	35-39	148
1B	Male	40-44	301
1B	Male	45-49	479
1B	Male	50-54	665
1B	Male	55-59	897
1B	Male	60-64	1,359
1B	Male	65+	30
Total			4,295

Plan	Gender	Age Group	Number of Policyholders
2	Male	0-24	3
2	Male	25-29	13
2	Male	30-34	13
2	Male	35-39	33
2	Male	40-44	78
2	Male	45-49	115
2	Male	50-54	128
2	Male	55-59	108
2	Male	60-64	86
2	Male	65+	139
Total			716

Female

Plan	Gender	Age Group	Number of Policyholders
1A	Female	0-24	411
1A	Female	25-29	217
1A	Female	30-34	213
1A	Female	35-39	238
1A	Female	40-44	346
1A	Female	45-49	478
1A	Female	50-54	595
1A	Female	55-59	804
1A	Female	60-64	1,045
1A	Female	65+	34
Total			4,381

Plan	Gender	Age Group	Number of Policyholders
1B	Female	0-24	161
1B	Female	25-29	62
1B	Female	30-34	74
1B	Female	35-39	159
1B	Female	40-44	301
1B	Female	45-49	496
1B	Female	50-54	725
1B	Female	55-59	1,209
1B	Female	60-64	2,023
1B	Female	65+	39
Total			5,249

Plan	Gender	Age Group	Number of Policyholders
2	Female	0-24	3
2	Female	25-29	3
2	Female	30-34	17
2	Female	35-39	26
2	Female	40-44	67
2	Female	45-49	96
2	Female	50-54	135
2	Female	55-59	153
2	Female	60-64	186
2	Female	65+	307
Total			993

*** Please note: The method of counting enrollment numbers for this report was changed for the April 200 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Total Policies in Force by Plan, Gender, Zone and Age Group as of May 2005 Month End

Male

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	1	Male	0-24	25
1A	1	Male	25-29	26
1A	1	Male	30-34	20
1A	1	Male	35-39	31
1A	1	Male	40-44	46
1A	1	Male	45-49	43
1A	1	Male	50-54	43
1A	1	Male	55-59	41
1A	1	Male	60-64	33
1A	1	Male	65+	1
Total				309

Female

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	1	Female	0-24	33
1A	1	Female	25-29	31
1A	1	Female	30-34	20
1A	1	Female	35-39	20
1A	1	Female	40-44	24
1A	1	Female	45-49	38
1A	1	Female	50-54	56
1A	1	Female	55-59	78
1A	1	Female	60-64	78
1A	1	Female	65+	2
Total				380

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	2	Male	0-24	141
1A	2	Male	25-29	75
1A	2	Male	30-34	67
1A	2	Male	35-39	77
1A	2	Male	40-44	128
1A	2	Male	45-49	138
1A	2	Male	50-54	152
1A	2	Male	55-59	132
1A	2	Male	60-64	113
1A	2	Male	65+	4
Total				1,027

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	2	Female	0-24	138
1A	2	Female	25-29	60
1A	2	Female	30-34	80
1A	2	Female	35-39	77
1A	2	Female	40-44	117
1A	2	Female	45-49	140
1A	2	Female	50-54	161
1A	2	Female	55-59	212
1A	2	Female	60-64	300
1A	2	Female	65+	10
Total				1,295

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	3	Male	0-24	272
1A	3	Male	25-29	127
1A	3	Male	30-34	100
1A	3	Male	35-39	147
1A	3	Male	40-44	256
1A	3	Male	45-49	310
1A	3	Male	50-54	349
1A	3	Male	55-59	311
1A	3	Male	60-64	310
1A	3	Male	65+	7
Total				2,189

Plan	Zone	Gender	Age Group	Number of Policyholders
1A	3	Female	0-24	240
1A	3	Female	25-29	126
1A	3	Female	30-34	113
1A	3	Female	35-39	141
1A	3	Female	40-44	205
1A	3	Female	45-49	300
1A	3	Female	50-54	378
1A	3	Female	55-59	514
1A	3	Female	60-64	667
1A	3	Female	65+	22
Total				2,706

* Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Total Policies in Force by Plan, Gender, Zone and Age Group as of May 2005 Month End

Male

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	1	Male	0-24	17
1B	1	Male	25-29	4
1B	1	Male	30-34	8
1B	1	Male	35-39	22
1B	1	Male	40-44	30
1B	1	Male	45-49	30
1B	1	Male	50-54	39
1B	1	Male	55-59	61
1B	1	Male	60-64	79
1B	1	Male	65+	3
Total				293

Female

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	1	Female	0-24	13
1B	1	Female	25-29	7
1B	1	Female	30-34	9
1B	1	Female	35-39	6
1B	1	Female	40-44	19
1B	1	Female	45-49	32
1B	1	Female	50-54	33
1B	1	Female	55-59	74
1B	1	Female	60-64	134
1B	1	Female	65+	2
Total				329

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	2	Male	0-24	84
1B	2	Male	25-29	14
1B	2	Male	30-34	31
1B	2	Male	35-39	44
1B	2	Male	40-44	88
1B	2	Male	45-49	141
1B	2	Male	50-54	208
1B	2	Male	55-59	236
1B	2	Male	60-64	361
1B	2	Male	65+	6
Total				1,213

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	2	Female	0-24	54
1B	2	Female	25-29	16
1B	2	Female	30-34	26
1B	2	Female	35-39	58
1B	2	Female	40-44	88
1B	2	Female	45-49	160
1B	2	Female	50-54	230
1B	2	Female	55-59	375
1B	2	Female	60-64	570
1B	2	Female	65+	11
Total				1,588

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	3	Male	0-24	176
1B	3	Male	25-29	43
1B	3	Male	30-34	39
1B	3	Male	35-39	82
1B	3	Male	40-44	183
1B	3	Male	45-49	308
1B	3	Male	50-54	418
1B	3	Male	55-59	600
1B	3	Male	60-64	919
1B	3	Male	65+	21
Total				2,789

Plan	Zone	Gender	Age Group	Number of Policyholders
1B	3	Female	0-24	94
1B	3	Female	25-29	39
1B	3	Female	30-34	39
1B	3	Female	35-39	95
1B	3	Female	40-44	194
1B	3	Female	45-49	304
1B	3	Female	50-54	462
1B	3	Female	55-59	760
1B	3	Female	60-64	1,319
1B	3	Female	65+	26
Total				3,332

*** Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Total Policies in Force by Plan, Gender, Zone and Age Group as of May 2005 Month End

Male

Plan	Zone	Gender	Age Group	Number of Policyholders
2	1	Male	0-24	0
2	1	Male	25-29	1
2	1	Male	30-34	4
2	1	Male	35-39	9
2	1	Male	40-44	10
2	1	Male	45-49	17
2	1	Male	50-54	20
2	1	Male	55-59	15
2	1	Male	60-64	9
2	1	Male	65+	7
Total				92

Female

Plan	Zone	Gender	Age Group	Number of Policyholders
2	1	Female	0-24	1
2	1	Female	25-29	0
2	1	Female	30-34	3
2	1	Female	35-39	2
2	1	Female	40-44	9
2	1	Female	45-49	12
2	1	Female	50-54	18
2	1	Female	55-59	15
2	1	Female	60-64	13
2	1	Female	65+	24
Total				97

Plan	Zone	Gender	Age Group	Number of Policyholders
2	2	Male	0-24	1
2	2	Male	25-29	3
2	2	Male	30-34	4
2	2	Male	35-39	10
2	2	Male	40-44	23
2	2	Male	45-49	37
2	2	Male	50-54	38
2	2	Male	55-59	22
2	2	Male	60-64	29
2	2	Male	65+	44
Total				211

Plan	Zone	Gender	Age Group	Number of Policyholders
2	2	Female	0-24	0
2	2	Female	25-29	1
2	2	Female	30-34	6
2	2	Female	35-39	10
2	2	Female	40-44	23
2	2	Female	45-49	28
2	2	Female	50-54	38
2	2	Female	55-59	51
2	2	Female	60-64	51
2	2	Female	65+	94
Total				302

Plan	Zone	Gender	Age Group	Number of Policyholders
2	3	Male	0-24	2
2	3	Male	25-29	9
2	3	Male	30-34	5
2	3	Male	35-39	14
2	3	Male	40-44	45
2	3	Male	45-49	61
2	3	Male	50-54	70
2	3	Male	55-59	71
2	3	Male	60-64	48
2	3	Male	65+	88
Total				413

Plan	Zone	Gender	Age Group	Number of Policyholders
2	3	Female	0-24	2
2	3	Female	25-29	2
2	3	Female	30-34	8
2	3	Female	35-39	14
2	3	Female	40-44	35
2	3	Female	45-49	56
2	3	Female	50-54	79
2	3	Female	55-59	87
2	3	Female	60-64	122
2	3	Female	65+	189
Total				594

*** Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Total Subsidy/Non-Subsidy Restated for May 2005 Month End

Plan		Number of Policyholders
1A	Non-subsidized	4,916
1A	Subsidized	2,990
1B	Non-subsidized	9,544
2	Non-subsidized	962
2	Subsidized	747
Total		19,159

Total Subsidy by Level

Subsidy Level	Number of Policyholders
Level 0	15,422
Level 1	528
Level 2	525
Level 3	685
Level 4	1,490
Level 5	509
Total	19,159

	Number of Policyholders
Plan 1A, Zone 1, Non-Subsidized	368
Plan 1A, Zone 1, Subsidized	321
Plan 1A, Zone 2, Non-Subsidized	1,496
Plan 1A, Zone 2, Subsidized	826
Plan 1A, Zone 3, Non-Subsidized	3,052
Plan 1A, Zone 3, Subsidized	1,843
Plan 1B, Zone 1, Non-Subsidized	622
Plan 1B, Zone 2, Non-Subsidized	2,801
Plan 1B, Zone 3, Non-Subsidized	6,121
Plan 2, Zone 1, Non-Subsidized	88
Plan 2, Zone 1, Subsidized	101
Plan 2, Zone 2, Non-Subsidized	302
Plan 2, Zone 2, Subsidized	211
Plan 2, Zone 3, Non-Subsidized	572
Plan 2, Zone 3, Subsidized	435
Total	19,159

*** Please note: The method of counting enrollment numbers for this report was changed for the April 2005 report and going forward. The counts are now being counted on a prorated basis using actual days covered.**

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

Wisconsin Health Insurance Risk Sharing Plan

Monthly Service Report

For: May, 2005

Customer Service/Policyholder Services

Week Ending	Calls Offered	Calls Handled	# Abandoned	% Abandoned	Average Wait (ASA)*	Longest Wait	Average Talk	Service Level**
5/6/2005	3,720	3,678	42	1.10%	00:00:23	00:04:28	00:03:27	93.80%
5/13/2005	3,921	4,340	72	1.60%	00:00:41	00:05:39	00:03:41	88.90%
5/20/2005	4,333	4,261	72	1.00%	00:00:36	00:06:53	00:03:32	92.20%
5/27/2005	3,849	3,764	85	2.20%	00:00:41	00:12:39	00:03:41	88.20%

Historical

02-2004	10,435	9,338	1,097	10.5 %	00:04:26	00:14:17	00:03:13	
03-2004	11,213	9,694	1,519	13.5 %	00:05:02	00:13:04	00:03:06	
04-2004	13,716	12,529	1,187	8.7 %	00:03:34	00:11:04	00:02:52	
05-2004	9,600	8,908	692	7.2 %	00:02:58	00:11:22	00:03:11	
01-2005	10,390	9,357	1,015	9.6 %	00:04:09	00:11:24	00:03:35	
02-2005	10,618	9,625	933	8.8 %	00:03:40	00:12:35	00:03:29	
03-2005	13,363	11,782	1,561	11.5 %	00:04:34	00:18:00	00:03:30	
04-2005	18,245	17,962	283	1.6 %	00:00:30	00:09:35	00:03:38	93.00%
05-2005	17,638	17,311	327	1.9 %	00:00:39	00:12:39	00:03:39	89.00%

Medical Affairs Telephone

5/6/2005	184	181	3	0.90%	00:00:16	00:03:36	00:02:34	94.40%
5/13/2005	194	189	5	2.60%	00:00:18	00:02:19	00:02:54	96.30%
5/20/2005	192	188	4	0.90%	00:00:15	00:01:38	00:02:23	100.00%
5/27/2005	158	159	2	1.30%	00:00:16	00:02:50	00:03:01	97.50%

PBM Telephone Results

5/6/2005	524	523	1	0.10%	00:00:02	00:01:31	00:04:11	97.40%
5/13/2005	427	425	0	0.00%	00:00:02	00:01:21	00:04:23	98.10%
5/20/2005	361	361	0	0.00%	00:00:01	00:00:48		99.20%
5/27/2005	312	312	0	0.00%	00:00:01	00:00:37		99.70%

All Time Formats are hh:mm:ss Historical Stats prior to April 1, 2005 have all been converted to the new format.

* ASA = Average Speed of Answer

** Service Level = Calls handled within 120 seconds divided by the number of calls offered.

*** Monthly totals are based on actual month end which is the last day of the month.

Most Commonly Asked Questions to Customer Service/ Policyholder Services

- What is the status of my claim?
- Why was my claim denied?
- What is the status of my application?

Open Written Correspondence

Department	Beginning Inventory	Received	Completed	1 to 2 Days	3 to 5 Days	6+ Days	Ending Inventory
CUSTOMER SERVICE	27	103	105	8	7	10	25
MEDICAL AFFAIRS	0	0	0	0	0	0	0
POLICYHOLDER SERVICES	475	568	416	19	73	535	627

First Call Resolution

Number of Calls Handled	First Call Resolved	Percent of Calls
10,310	9,591	93.03%

Telephone and Written

Number of Days	Number of Inquires	Number Closed	Percentage
5	2520	2400	95.24%
2	2520	2345	93.06%

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

CLAIMS THAT HAVE FINALIZED TO PAYMENT OR DENIAL AS OF MAY 2005 MONTH END(5/26/2005)

	May 2004*	Jun 2004*	Jul 2004*	Aug 2004*	Sep 2004*	Oct 2004*	Nov 2004*	Dec 2004*	Jan 2005*	Feb 2005*	Mar 2005*	Apr 2005**	May 2005**
	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims
Plan 1A													
Pharmacy												23,720	27,571
Inpatient Hospital												71	216
Inpatient Hospital Crossovers												2	5
Outpatient Hospital												2,240	2,532
Outpatient Hospital Crossovers												21	43
Professional												8,566	16,271
Professional Crossovers												31	115
Nursing Home												13	26
Nursing Home Crossovers												0	0
Miscellaneous												1,070	3,032
Miscellaneous Crossovers												4	6
Total Plan 1A												35,738	49,817
Plan 1B													
Pharmacy												20,059	23,142
Inpatient Hospital												66	169
Inpatient Hospital Crossovers												1	3
Outpatient Hospital												1,698	1,903
Outpatient Hospital Crossovers												11	24
Professional												6,617	13,114
Professional Crossovers												63	55
Nursing Home												1	11
Nursing Home Crossovers												0	0
Miscellaneous												717	1,781
Miscellaneous Crossovers												1	15
Total Plan 1B												29,234	40,217
Plan 2													
Pharmacy												12,083	13,905
Inpatient Hospital												4	10
Inpatient Hospital Crossovers												52	103
Outpatient Hospital												155	186
Outpatient Hospital Crossovers												771	1,233
Professional												311	525
Professional Crossovers												3,133	6,487
Nursing Home												6	6
Nursing Home Crossovers												5	18
Miscellaneous												252	358
Miscellaneous Crossovers												622	1,315
Total Plan 2												17,394	24,146
Total													
Pharmacy	62,285	59,962	60,942	60,172	61,367	92,799	63,286	63,621	62,372	61,359	63,736	55,862	64,618
Inpatient Hospital	439	377	474	383	268	612	439	540	422	462	421	141	395
Inpatient Hospital Crossovers	87	65	99	71	42	99	75	71	73	96	77	55	111
Outpatient Hospital	4,121	4,083	4,953	3,962	3,571	5,386	4,145	5,705	4,027	4,448	3,164	4,093	4,621
Outpatient Hospital Crossovers	1,129	1,325	1,216	935	770	1,199	975	1,598	1,015	1,211	882	803	1,300
Professional	26,378	26,837	26,033	20,637	22,116	30,612	24,387	32,229	24,762	26,193	18,349	15,494	29,910
Professional Crossovers	4,072	4,465	5,037	3,434	3,675	5,294	3,918	6,286	4,251	4,592	2,977	3,227	6,657
Nursing Home	48	35	18	11	16	34	18	14	31	26	29	20	43
Nursing Home Crossovers	13	7	19	14	11	36	11	11	6	4	2	5	18
Miscellaneous	2,216	1,835	2,278	1,823	1,286	2,120	1,921	2,405	1,817	1,842	1,948	2,039	5,171
Miscellaneous Crossovers	0	0	0	0	0	0	0	0	0	0	0	627	1,336
Total	100,788	98,991	101,069	91,442	93,122	138,191	99,175	112,480	98,776	100,233	91,585	82,366	114,180

* The reporting of claims numbers before April 2005 did not include information by Plan. Previously stated numbers are now reported only in the Total section of this report.

** Claim adjustments have been reported in the non-Crossover categories on history prior to April 2005. Claim adjustments are not included in any category beginning with April 2

***Starting this month the total number of claims in this report does not balance to the total number of claims reported in the Paid and Denied(non-pharmacy)report because a claim that has both a paid line and a denied line is counted only once in this report. It is counted once as a paid claim and once as a denied claim in the Paid

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
AVERAGE CLAIMS PROCESSING DAYS AS OF MAY 2005 MONTH END(5/26/2005)

	May 2004* Ave # Days	Jun 2004* Ave # Days	Jul 2004* Ave # Days	Aug 2004* Ave # Days	Sep 2004* Ave # Days	Oct 2004* Ave # Days	Nov 2004* Ave # Days	Dec 2004* Ave # Days	Jan 2005* Ave # Days	Feb 2005* Ave # Days	Mar 2005* Ave # Days	Apr 2005** Ave # Days	May 2005** Ave # Days
Plan 1A													
Inpatient Hospital												30.04	32.29
Inpatient Hospital Crossovers												37.00	23.25
Outpatient Hospital												11.96	10.73
Outpatient Hospital Crossovers												25.00	23.45
Professional												20.39	16.04
Professional Crossovers												23.86	18.75
Nursing Home												13.88	27.53
Nursing Home Crossovers												0.00	0.00
Miscellaneous												23.20	21.24
Miscellaneous Crossovers												36.75	24.60
Average for the Month for Plan 1A												19.09	16.19
Plan 1B													
Inpatient Hospital												27.56	29.74
Inpatient Hospital Crossovers												35.00	19.66
Outpatient Hospital												12.69	10.35
Outpatient Hospital Crossovers												27.63	21.20
Professional												20.50	15.15
Professional Crossovers												22.80	22.86
Nursing Home												16.00	37.66
Nursing Home Crossovers												0.00	0.00
Miscellaneous												23.74	20.84
Miscellaneous Crossovers												11.00	23.81
Average for the Month for Plan 1B												19.33	15.29
Plan 2													
Inpatient Hospital												24.00	68.37
Inpatient Hospital Crossovers												29.38	19.32
Outpatient Hospital												19.54	20.59
Outpatient Hospital Crossovers												25.07	16.97
Professional												25.29	23.62
Professional Crossovers												23.33	15.34
Nursing Home												21.33	18.80
Nursing Home Crossovers												22.60	14.33
Miscellaneous												19.19	21.65
Miscellaneous Crossovers												26.35	19.21
Average for the Month for Plan 2												23.91	16.77
Total													
Inpatient Hospital	17.00	16.00	15.00	15.00	17.00	21.00	18.00	17.00	15.00	17.00	15.00	28.58	32.01
Inpatient Hospital Crossovers	14.00	11.00	9.00	11.00	15.00	15.00	16.00	13.00	12.00	14.00	10.00	29.75	19.48
Outpatient Hospital	13.00	11.00	10.00	11.00	14.00	14.00	13.00	13.00	11.00	12.00	12.00	12.45	10.86
Outpatient Hospital Crossovers	19.00	15.00	13.00	15.00	19.00	21.00	22.00	25.00	19.00	19.00	16.00	25.10	17.25
Professional	15.00	11.00	12.00	14.00	16.00	15.00	15.00	14.00	13.00	11.00	11.00	20.53	15.78
Professional Crossovers	11.00	10.00	11.00	14.00	15.00	17.00	17.00	17.00	13.00	12.00	13.00	23.32	15.47
Nursing Home	11.00	16.00	10.00	17.00	17.00	15.00	14.00	14.00	14.00	15.00	15.00	15.76	28.24
Nursing Home Crossovers	6.00	11.00	9.00	9.00	16.00	17.00	11.00	12.00	18.00	15.00	9.00	22.60	14.33
Miscellaneous	15.00	13.00	14.00	14.00	19.00	21.00	24.00	24.00	17.00	18.00	17.00	22.97	21.12
Miscellaneous Crossovers	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	26.39	19.28
Average for the Month	***16.00	12.00	12.00	13.00	16.00	16.00	***16.00	16.00	13.00	14.00	12.00	20.12	16.00

* The reporting of average processing days before April 2005 did not include information by Plan. Previously stated numbers are now reported only in the Total section of this report.

** Average processing days on claims adjustments used to be reported by the previous administrator. Average processing days will not be reported on claim adjustments beginning with April 2005. Therefore, they have not been reported in this report for any month.

*** Higher than normal claim average resulting from clean up of aged medical review claims

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
HIRSP CLAIMS INVENTORY AS OF MAY 2005 MONTH END(5/26/2005)**

Pended Claims Data	May 2004*	Jun 2004*	Jul 2004*	Aug 2004*	Sep 2004*	Oct 2004*	Nov 2004*	Dec 2004*	Jan 2005*	Feb 2005*	Mar 2005**	Apr 2005***	May 2005***
# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims	# of Claims
Prior to Entry													
Total												1,056	1,443
Pre-System Suspend													
Plan 1A												3,954	1,734
Plan 1B												2,946	1,284
Plan 2												2,318	1,035
Total											20,482	9,218	4,053
Total Over 30 Days Old												1,696	736
System Pended													
Plan 1A													
Inpatient Hospital												232	256
Inpatient Hospital Crossovers												2	2
Outpatient Hospital												759	660
Outpatient Hospital Crossovers												20	10
Professional												4,347	3,606
Professional Crossovers												46	34
Nursing Home												29	25
Nursing Home Crossovers												0	0
Miscellaneous												1,146	873
Miscellaneous Crossovers												3	2
Total Plan 1A												6,584	5,468
Total Over 30 Days Old												1,856	1,778
Plan 1B													
Inpatient Hospital												143	144
Inpatient Hospital Crossovers												2	2
Outpatient Hospital												495	517
Outpatient Hospital Crossovers												14	7
Professional												3,218	2,773
Professional Crossovers												23	26
Nursing Home												8	2
Nursing Home Crossovers												0	0
Miscellaneous												667	566
Miscellaneous Crossovers												7	2
Total Plan 1B												4,577	4,039
Total Over 30 Days Old												1,360	1,296
Plan 2													
Inpatient Hospital												3	1
Inpatient Hospital Crossovers												40	28
Outpatient Hospital												60	46
Outpatient Hospital Crossovers												329	252
Professional												147	87
Professional Crossovers												1,741	1,303
Nursing Home												2	3
Nursing Home Crossovers												18	19
Miscellaneous												109	101
Miscellaneous Crossovers												557	429
Total Plan 2												3,006	2,269
Total Over 30 Days Old												694	526
Total													
Inpatient Hospital	126	112	99	129	230	228	142	127	169	170	0	378	401
Inpatient Hospital Crossovers	9	14	13	8	19	17	7	15	22	16	0	44	32
Outpatient Hospital	918	609	818	983	1,040	1,002	963	699	969	650	0	1,314	1,223
Outpatient Hospital Crossovers	477	214	256	422	447	581	540	247	403	275	0	363	269
Professional	6,824	3,104	5,690	7,073	7,344	8,292	6,457	5,872	5,322	3,600	0	7,712	6,466
Professional Crossovers	713	381	836	1,587	1,483	1,643	1,564	580	1,190	668	0	1,810	1,363
Nursing Home	12	1	6	7	9	8	4	15	13	10	0	39	30
Nursing Home Crossovers	1	2	2	1	6	2	2	3	1	0	0	18	19
Miscellaneous	321	449	379	617	863	1,137	865	728	836	845	0	1,922	1,540
Miscellaneous Crossovers	0	0	0	0	0	0	0	0	0	0	0	567	433
Total	9,401	4,886	8,099	10,827	11,441	12,910	10,544	8,286	8,925	6,234	0	14,167	11,776
Total Over 30 Days Old	1,427	1,435	1,198	989	1,437	1,813	1,897	651	868	467	0	5,606	4,336
Grand Total	9,401	4,886	8,099	10,827	11,441	12,910	10,544	8,286	8,925	6,234	20,482	24,441	17,272

* The reporting of inventory numbers before April 2005 did not include information by Plan. Previously stated numbers are now reported only in the Total section of this report.

** Prior administrator claim inventory is zero due to transition of plan administration to WPS. 1,807 claims were pending and transferred to WPS on March 31st. WPS received 20,482 HIRSP claims from providers and the prior administrator during the period 3/14/2005 - 3/31/2005.

*** Claim adjustments have been reported in the non-Crossover categories on history prior to April 2005. Claim adjustments are not included in any category beginning with April 2005.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

MEDICAL CLAIMS DENIED REPORT*

As of May 2005 Month End(5/26/2005)

Processed Month	Plan 1A		Plan 1B		Plan 2		All Plans			Denial Rate
	Paid	Denied	Paid	Denied	Paid	Denied	Paid	Denied	Total	
May 2004	13,862	5,916	8,378	3,787	4,326	2,234	26,566	11,937	38,503	31.0%
June 2004	14,320	5,412	8,906	3,554	4,796	2,041	28,022	11,007	39,029	28.2%
July 2004	14,539	5,511	9,098	3,723	4,916	2,340	28,553	11,574	40,127	28.8%
August 2004	11,258	4,409	7,199	3,018	3,743	1,643	22,200	9,070	31,270	29.0%
September 2004	11,398	4,318	7,676	3,016	3,924	1,423	22,998	8,757	31,755	27.6%
October 2004	16,461	5,752	11,535	3,880	5,751	2,013	33,747	11,645	45,392	25.7%
November 2004	12,686	4,232	9,584	3,458	4,389	1,540	26,659	9,230	35,889	25.7%
December 2004	16,889	5,819	12,715	4,376	6,458	2,602	36,062	12,797	48,859	26.2%
January 2005	12,980	4,239	9,710	3,192	4,542	1,741	27,232	9,172	36,404	25.2%
February 2005	12,985	5,197	9,862	3,935	4,884	2,011	27,731	11,143	38,874	28.7%
March 2005	9,529	3,403	7,389	2,752	3,297	1,479	20,215	7,634	27,849	27.4%
April 2005	10,223	2,143	7,789	1,678	4,185	1,109	22,197	4,930	27,127	18.2%
May 2005	18,903	4,196	14,308	3,387	7,814	2,475	41,025	10,058	51,083	19.7%

* Claims denied by the PBM are not included. See page 30 for claims denied by the PBM.

A claim may have some paid lines and some denied lines. Therefore, a claim that has both paid and rejected lines has been counted as a paid claim and as a denied claim. This results in more total claims being reported in this report than in the report titled Claims That Have Finalized to Payment or Denial Report.

END OF MONTH MAY 2005 DENIAL REASON DETAIL

Denial Reason	Volume	Top 10 Reasons for Denial
18/DU	4,073	DUPLICATE CLAIM/SERVICE
49	1,017	NONCOVERED SERVICES BECAUSE THIS IS A ROUTINE EXAM OR SCREENING PROCEDURE DONE IN CONJUNCTION WITH A ROUTINE EXAM
23	846	CLAIM DENIED/REDUCED BECAUSE CHARGES HAVE BEEN PAID BY ANOTHER PAYER AS PART OF COORDINATION OF BENEFITS
51	794	THIS IS A PREEXISTING CONDITION. MEDICAL RECORDS OBTAINED FROM YOUR PROVIDER HAVE IDENTIFIED A PRE-EXISTING CONDITION
EM	652	WE NEED THE MEDICARE EXPLANATION OF BENEFITS TO PROCESS THIS CHARGE
27/28	535	EXPENSE(S) INCURRED OUTSIDE COVERAGE PERIOD ARE NOT COVERED
IS	402	THIS PROCEDURE IS INCIDENTAL TO AND CONSIDERED PART OF THE PRIMARY PROCEDURE
V1	245	PRIMARY SERVICE CODE INCLUDES THE OTHER SERVICES BILLED, NO PAYMENTS HAVE BEEN ALLOWED FOR THE OTHER SERVICES
XZ	209	WE WILL COMPLETE PROCESSING WHEN WE RECEIVE THE REQUESTED MEDICAL RECORDS
29	160	THE TIME LIMIT FOR FILING HAS EXPIRED

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

**WISCONSIN HEALTH INSURANCE RISK SHARING PLAN
PHARMACY CLAIMS DENIED REPORT
As of May 2005 Month End(5/31/2005)***

Processed Month	Denied
May 2004	7,614
June 2004	8,148
July 2004	8,570
August 2004	8,297
September 2004	9,048
October 2004	13,104
November 2004	8,873
December 2004	8,555
January 2005	8,664
February 2005	7,627
March 2005	8,304
April 2005	25,472
May 2005	21,252

END OF MONTH MAY 2005 DENIAL REASON DETAIL

Top 10 Reasons for Denial	Volume
DUR Rejected Error-Interaction Drugs	8,635
Plan Limitation Exceeded	5,143
NDC Not Covered	3,416
Refill Too Soon	1,249
Missing/Invalid Dispense as Written Code	896
Submit Bill to Other Processor/Primary Payer	482
Non-Matched Cardholder Cardholder ID	380
Missing/Invalid Birth Date	176
Missing/Invalid Sex Code	157
Duplicate Paid/Captured Claim	138

*** Each prescription processed and denied is counted as one claim**

**Note the different end of month date from previous reports in this pack
This is due to these figures being taken from a production PBM report
rather than from the current HIRSP plan administrator's reporting files.**

WISCONSIN HEALTH INSURANCE RISK SHARING PLAN

Claims Accuracy Performance *
May 2005

Medical

Month	Total Number of Claims	Total of Claims Payments	Total Claim Payments Reviewed	Total Correct Payment	Accuracy Rate
June-2004	39,029	\$5,640,805.00	\$49,747.00	\$49,826.00	99.84%
July-2004	40,127	\$7,059,137.00	\$80,036.00	\$80,036.00	100.00%
August-2004	31,270	\$5,264,531.00	\$49,875.00	\$49,875.00	100.00%
September-2004	31,755	\$4,024,798.00	\$86,524.00	\$86,524.00	100.00%
October-2004	45,392	\$8,169,270.00	\$63,287.00	\$63,287.00	100.00%
November-2004	35,889	\$6,631,268.00	\$79,182.00	\$79,156.00	99.97%
December-2004	48,859	\$9,595,500.00	\$52,645.00	\$52,645.00	100.00%
January-2005	36,404	\$6,551,366.00	\$95,201.00	\$95,201.00	100.00%
February-2005	38,874	\$6,256,306.00	\$80,016.00	\$80,016.00	100.00%
March-2005	27,849	\$5,125,139.00	\$58,769.00	\$58,769.00	100.00%
April-2005	28,646	\$4,001,294.29	\$67,258.90	\$67,605.30	99.49%
May-2005	46,570	\$8,593,111.00	\$77,521.77	\$76,450.29	99.60%

* This report is prepared on a processed date basis using all dates in a calendar month versus other reports that are prepared on a schedule that uses the standard end of month processing dates. Therefore, claims data in this report will not agree with claims data on other reports.

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.

Wisconsin Health Insurance Risk Sharing Plan

Appeals and Grievance

May, 2005

Claim Appeals

Total Claim Appeals Received	21
Drug & Drug Formulary	10
Enrollment/Eligibility Requirements	2
Not Covered Benefit	2
Not Medically Necessary	2
Plan Administration	5
 Total Claims/Reinstatements Closed	 29
Claim Appeals Average Number of Days	6.931

Grievances

Grievance Committee	
Billing/Claim Processing	1
Not Covered Benefit	1
Plan Administration	2

Due to the transition of HIRSP plan administrator services to a new contractor effective April 1, 2005 claims volumes and payments and other operational statistics will be different than previous months and should not be used for comparisons.